

**Draft Opinion:**

## **In this time of COVID-19 a new consensus on how we should be working to improve adolescent well-being is long overdue**

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Every generation of adolescents grapples with the difficult transition from childhood into adult life: juggling social and academic pressures at school; coping with changing dynamics within family and friendship groups; experiencing the physical and mental transformation of puberty; and making crucial decisions about whether to pursue further education or embark on careers.

This generation of 10-19-year olds is no exception – except they are *also* having to navigate adolescence during a global pandemic that is causing unprecedented harm to people’s health, and damaging the social and economic fabric of countries world-wide.

Adolescents have been among the worst affected by the indirect consequences of the pandemic. It has severely disrupted education provision, for example, which can have adverse effects on adolescents’ social skills at a critical time in their development. When adolescents are unable to attend schools, they may experience depression, social anxiety and stress that can lead to deeper [mental health](#) issues, or even push them toward risky behaviours, including drug abuse and self-harm.

With so many pressures on governments to address the direct health consequences of COVID-19, limit its transmission and kick-start economies, finding time and resources to tackle its indirect consequences, including those affecting adolescents, is a challenge.

Adolescents are sometimes underserved by policies intended to improve their health and well-being, and are not always consulted when interventions for their benefit are being developed. A recent [study](#), for example, estimated that development assistance for adolescent health only accounted for 1.6% of *all* development assistance between 2003 and 2015.

Occasionally, issues that are of importance to young people are under-resourced, or not addressed in the appropriate way. For example, in some countries, comprehensive sexuality education interventions can be very limited, or actively restricted. Many young people are denied access to age-appropriate information to protect themselves from unintended pregnancy and sexually transmitted infections, or to avoid situations that put them at risk of [domestic or gender-based violence](#) or sexual exploitation, which have also increased during the pandemic. If they do access helpful information, they may often find that they don’t have any youth-friendly services to address the repercussions of these issues.

Another major issue that has made work in the field of adolescent well-being more complex than it needs to be has been the lack of a specific unified framework for addressing the issues. This can affect the quality of strategies and interventions being developed for adolescents, because having piecemeal guidelines, research, toolkits and documents covering broadly similar issues - all claiming to be authoritative - inevitably leads to costly duplication and confusion for programme implementers about the right approaches to take.

Fortunately, a recent, extremely welcome initiative is seeking to reframe the narrative around adolescent well-being, and lay the foundations for improved interventions that fully take account of young people’s self-articulated needs.

After the introduction and adoption of the Sustainable Development Goals (SDGs) in 2015, one big objective was to provide access to universal healthcare for people of all ages, everywhere in the world. The task before the coalition of governments, UN organizations, non-governmental organizations and academic institutions who have come together to support a [Call to Action for Adolescent Wellbeing](#), backed by a new definition and conceptual framework, was to define what adolescent well-being looks like.

The resulting definition and conceptual framework for adolescent health is published this week in the Journal of Adolescent Health and is available [here](#).

The paper defines adolescent wellbeing as being a state where: ‘Adolescents have the support, confidence, and resources to thrive in contexts of secure and healthy relationships, realizing their full potential and rights’ and also stresses the importance of five interconnected domains:

1. Good health and optimum nutrition
2. Connectedness, positive values and contribution to society
3. Safety and a supportive environment
4. Learning, competence, education, skills and employability
5. Agency and resilience.

The five domains encompass both objective and subjective terminology, and are underpinned by gender, equity and rights considerations. Collectively, the definition and framework provide a new basis for building global consensus around working to improve adolescent well-being.

One key challenge in this process was to ensure that those with the deepest insights to what this generation of adolescents need – adolescents and young people themselves – were fully consulted.

As Board Members representing an Adolescents and Youth Constituency at one of the key organisations involved in this process, the Partnership for Maternal, Newborn & Child Health (PMNCH), the co-authors of this opinion are proud to have driven the consultation process to develop the framework.

Carrying out a global consultation in the time of COVID-19 is challenging, as many adolescents could only be reached online, so additional outreach was required towards some marginalised groups, including indigenous youth and young migrants, to ensure their perspectives were included. Consultations continue, however, and under-represented groups, particularly those without internet access, will be reached.

The framework provides a new way of working, by looking at adolescent well-being through a comprehensive lens, which is even more important in these dynamic and critical times.

Ultimately, the aim is to have a globally adopted, evidence-based definition and framework governing how best to partner with adolescents and young people in designing interventions they will access and use, because they should be owned by and for them. This will be presented in a UN Summit on Adolescent Well-being, which partners such as PMNCH are working closely with Member States to mobilize towards in 2022 or 2023, the mid-way point towards the SDGs 2030 Agenda.

Since COVID-19 began, we have seen an immense amount of co-operation and collaborations, both within and between countries, such as the COVAX mechanism, the international partnership to distribute any COVID vaccine equitably, regardless of any country’s ability to pay.

Hopefully this spirit of international collaboration will be seen as the global definition and conceptual framework for adolescent wellbeing is rolled out.

Not only will such collaboration help to avoid costly duplication of effort. It will also enable programme managers to plan and co-ordinate their efforts around particular domains, so that collectively they will have a greater chance of meeting more international targets for adolescent health and wellbeing by 2030.